PATENT APPLICATION FEE DETERMINATION RECORD  Application of Do											cket Num	
Effective October 1, 2000												Ĭ
									NTITY	. ÷.	OTHER	THAN
_	(Column 1) (Column 2)							C	<u> </u>	OR	SMALL	ENTITY
Ľ	OTAL CLAIMS		36				RA	ΓE	FEE		RATE	FEE
FÇ	)A		NUMBER	FILED	NUMB	ER EXTRA	BASH	FEE	355.00	OA	BASIC FEE	710.00
TÓTAL CHARGEA				ils 20=			X\$	X\$ 9:=		OR	X\$18=	288
IN	INDEPENDENT CLAIMS		1/moving 18		8	inglista property.	X4(			OR	X80=	640
MULTIPLE DEPENDENT CLAIM PRESENT								5=		OR	+270=	0.40
* If the difference in column 1 is less than zero, enter *0* in column 2										OR	TOTAL	1,638
CLAIMS AS AMENDED - PART II								AL		,	OTHER	
	(Column 1) (Column 2) (Column 3)							· SMALL ENTITY			SMALL E	
ENT A	·	CLAIMS REMAINING AFTER AMENDMENT		PREVIO	BER DÜŞLY	PRESENT EXTRA	RA*	ΓE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
MENDM	Total	26	Minus	***	76		X\$	9=		OR.	X\$18=	
	Independent	* 11	Minus			•	· X4	<b>)</b> =		OR	X80=	
EIBST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								5=	.; .	OR	+270=	
and the second of the second o								)TAL			TOTAL	
								FEE		OR	ADDIT. FEE	
<u>~</u>	177	(Column 1)		(Colu		(Column 3)			ADDI-	۱ . ۱		ADDI-
AMENDMENT B		REMAINING AFTER AMENOMENT		PREVIO PAID	DUSLY	PRESENT EXTRA	RA*	re	TIONAL FEE		RATE	TIONAL
	Total	.23	Minus	=	36	=	X\$	9=_		ΩR	X\$18=	
	Independent	· 8	Minus		1/	E	X44	) <u> </u>		OR	· X80=	
Ľ	FIRST PRESE	٠, ٦	+13	S=		· OR	+270=					
		1 /						TAL.		OR	TOTAL	
	8 23 0 (Column 1) (Column 2) (Column 3							FEE		JUN	ADDIT. FEE	
	U.W.	(Column 1)	,	(Colui		(Column 3)			ABOL	1		ADD
AMENDMENT C		REMAINING AFTER AMENDMENT	. Ex	NUM PREVI PAID	BER	PRESENT EXTRA	RA	re	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
DW.	Total	. 23	Minus	.3	0	= /	X\$	9=		OR	X\$18=	
ME	Independent	. 8	Minus	••• /		=/	X40	) <del></del>		OR	X80=	
	FIRST PRESE	NTATION OF M	ULTIPLE DEF	PENDEN	CLAIM		<b> </b>	$\overline{}$			1270	
+135= OR +270=												
"If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."												
	ii me Tughest Nur The "Highest Nurr	mber Previously Pa ber Previously Pai	id For (Total o	a arace i r independ	ent) is the	highest numbe	r tound in t	та ар <sub>і</sub>	propriate bo	th col	umn 1.	

FORM PTO-075

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